
State:	Arkansas	Filing Company:	American Memorial Life Insurance Company
TOI/Sub-TOI:	L08 Life - Other/L08.000 Life - Other		
Product Name:	Whole Life Insurance Premiums Payable for Life End		
Project Name/Number:	Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003		

Filing at a Glance

Company:	American Memorial Life Insurance Company
Product Name:	Whole Life Insurance Premiums Payable for Life End
State:	Arkansas
TOI:	L08 Life - Other
Sub-TOI:	L08.000 Life - Other
Filing Type:	Form
Date Submitted:	11/26/2012
SERFF Tr Num:	ASLX-G128706229
SERFF Status:	Closed-Accepted For Informational Purposes
State Tr Num:	
State Status:	Closed-Accepted for Informational Purposes
Co Tr Num:	AR01479AM00003
Implementation	12/24/2012
Date Requested:	
Author(s):	SPI AssurantLH
Reviewer(s):	Linda Bird (primary)
Disposition Date:	11/30/2012
Disposition Status:	Accepted For Informational Purposes
Implementation Date:	

State Filing Description:

State: Arkansas
TOI/Sub-TOI: L08 Life - Other/L08.000 Life - Other
Product Name: Whole Life Insurance Premiums Payable for Life End
Project Name/Number: Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003

General Information

Project Name: Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating
Project Number: AR01479AM00003
Requested Filing Mode: Informational
Explanation for Combination/Other:
Submission Type: New Submission
Filing Status Changed: 11/30/2012
State Status Changed: 11/30/2012
Created By: SPI AssurantLH
Corresponding Filing Tracking Number:

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type:
Overall Rate Impact:
Deemer Date:
Submitted By: SPI AssurantLH

Filing Description:

Maximum Valuation Interest Rates

Company and Contact

Filing Contact Information

Jennifer Drabik, Compliance Analyst
440 Mount Rushmore Road
Rapid City, SD 57701

jennifer.drabik@assurant.com
605-719-0073 [Phone] 57073 [Ext]
605-719-0473 [FAX]

Filing Company Information

American Memorial Life Insurance Company
440 Mount Rushmore Road
Rapid City, SD 57701
(605) 719-0999 ext. [Phone]

CoCode: 67989
Group Code: 19
Group Name: Assurant, Inc. Group
FEIN Number: 46-0260270

State of Domicile: South Dakota
Company Type:
State ID Number:

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

Company	Amount	Date Processed	Transaction #
American Memorial Life Insurance Company	\$50.00	11/26/2012	65182952

State:	Arkansas	Filing Company:	American Memorial Life Insurance Company
TOI/Sub-TOI:	L08 Life - Other/L08.000 Life - Other		
Product Name:	Whole Life Insurance Premiums Payable for Life End		
Project Name/Number:	Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	11/30/2012	11/30/2012

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Form P-1075-S	Note To Reviewer	SPI AssurantLH	11/27/2012	11/27/2012

State:	Arkansas	Filing Company:	American Memorial Life Insurance Company
TOI/Sub-TOI:	L08 Life - Other/L08.000 Life - Other		
Product Name:	Whole Life Insurance Premiums Payable for Life End		
Project Name/Number:	Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003		

Disposition

Disposition Date: 11/30/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment: Company has requested we disregard form P-1075-S Data and Value Pages submitted in error with this filing

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Cover Letter		Yes
Supporting Document	Application		Yes
Supporting Document	P-1069-S-A Data & Value Pages, P-1074-S Data & Value Pages, P-1075-S Data & Value Pages		Yes
Supporting Document	69 Demos, 74 Demos, 75 Demos		No
Supporting Document	Flesch Certification		Yes

State: Arkansas **Filing Company:** American Memorial Life Insurance Company
TOI/Sub-TOI: L08 Life - Other/L08.000 Life - Other
Product Name: Whole Life Insurance Premiums Payable for Life End
Project Name/Number: Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003

Note To Reviewer

Created By:

SPI AssurantLH on 11/27/2012 02:46 PM

Last Edited By:

Linda Bird

Submitted On:

11/30/2012 11:43 AM

Subject:

Form P-1075-S

Comments:

There were Actuarial Memorandum as well as Data & Value Pages for form P-1075-S that were included with this filing. Please disregard these forms as they are not approved and were not included as forms on the cover letter. Please let me know if you need me to do anything from my end to remove these or if you have any questions. Thank you.

State:	Arkansas	Filing Company:	American Memorial Life Insurance Company
TOI/Sub-TOI:	L08 Life - Other/L08.000 Life - Other		
Product Name:	Whole Life Insurance Premiums Payable for Life End		
Project Name/Number:	Whole Life Insurance Premiums Payable for Life Endowment at Age 100 Nonparticipating/AR01479AM00003		

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter		
Comments:	Cover Letter		
Attachment(s):			
AR Cover Letter.PDF			

		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	Not applicable		

		Item Status:	Status Date:
Satisfied - Item:	P-1069-S-A Data & Value Pages, P-1074-S Data & Value Pages, P-1075-S Data & Value Pages		
Comments:	Data & Value Pages		
Attachment(s):			
__P-1069 d&v nic_2013_DRAFT Bracketed.PDF			
__P-1069 d&v non-nic_2013_DRAFT bracketed.PDF			
P-1074 d&v nicotine_DRAFT 2 Bracketed.PDF			
P-1074 d&v non-nicotine_DRAFT 2 Bracketed.PDF			
P-1075 d&v nicotine_DRAFT 2 Bracketed.PDF			
P-1075 d&v non-nicotine_DRAFT 2 Bracketed.PDF			

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification		
Comments:	Readability Certification		
Attachment(s):			
AR Readability.PDF			



November 26, 2012

Arkansas Department of Insurance
1200 W. Third Street
Little Rock, AR 72201-1904

RE: American Memorial Life Insurance Company
NAIC #0019-67989 FEIN #46-0260270
2013 Statutory Valuation Interest Rate and Nonforfeiture Interest Rate Change
P-1069-S-A-AR Individual Whole Life Insurance, Premiums Payable for Life
P-1074-S-AR Individual Whole Life Insurance, Premiums Payable for Life

Dear Commissioner:

Enclosed for your review are the Policy Data and Value pages for policy forms P-1069-S-A-AR and P-1074-S-AR.

Form P-1069-S-A-AR was previously approved by you on July 11, 2011, SERFF Tracking number ASLX-G127210372. Form P-1074-S-AR was previously approved by you on January 4, 2012, SERFF Tracking number ASLX-G127845329.

This filing is being made to comply with the reduction in the maximum valuation interest rates for 2013 life insurance issues. We, American Memorial Life Insurance Company certify that the only changes to these forms are the valuation and nonforfeiture interest rates listed on the Policy Data Page and the values calculated based on these rates. These changes are being made in accordance with the Standard Valuation Law and Standard Nonforfeiture Law.

If we do not receive acknowledgement of receipt of this letter by December 31, 2012, it is assumed approval has been granted. Your review of the enclosed filing materials is appreciated. If you have any questions, please feel free to contact me. I can be reached by phone (605-719-0073), by fax (605-719-0473) or by e-mail (jennifer.drabik@assurant.com).

Sincerely,

AMERICAN MEMORIAL LIFE INSURANCE COMPANY

Jennifer Drabik
Compliance Analyst

:jld

American Memorial Life Insurance Company
Statement of Variations
P-1069-S-A-AR
P-1074-S-AR

These items can be included as shown or changed as follows:

- [1] The interest rates for the Basis of Computation could change in the future.
- [2] The Mortality Table for the Basis of Computation could change in the future.

In addition to the items listed above, this form is subject to only minor modification in paper size and stock, ink, shading, border, company logo and adaptation to computer printing.

POLICY DATA PAGE

POLICY NUMBER 8-001001 1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	59.61**	30.40	15.50	N/A
PRE-AUTHORIZED CHECK	59.61	30.40	15.50	5.36

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	59.61
YOUR TOTAL ANNUAL PREMIUM IS	59.61

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 4.50%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, SMOKER

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF 1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	1000	0.00	0	0	0
2	1000	0.00	0	0	0
3	1000	7.84	3	69	32
4	1000	19.39	6	227	78
5	1000	31.31	9	86	122
6	1000	43.58	11	176	163
7	1000	56.18	13	68	203
8	1000	69.07	14	168	241
9	1000	82.24	15	186	278
10	1000	95.65	16	134	312
11	1000	109.33	17	7	345
12	1000	123.31	17	184	376
13	1000	137.67	17	322	407
14	1000	152.53	18	69	436
15	1000	167.84	18	161	464
16	1000	183.56	18	235	491
17	1000	199.60	18	293	517
18	1000	215.91	18	331	542
19	1000	232.40	18	348	565
20	1000	248.98	18	349	587

NONFORFEITURE FACTOR	13.04786
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POLICY DATA PAGE

POLICY NUMBER 8-001001 1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NON-NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	55.39**	28.25	14.40	N/A
PRE-AUTHORIZED CHECK	55.39	28.25	14.40	4.99

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	55.39
YOUR TOTAL ANNUAL PREMIUM IS	55.39

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 4.50%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, NON-SMOKER

2

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF 1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	1000	0.00	0	0	0
2	1000	0.00	0	0	0
3	1000	4.98	3	289	25
4	1000	14.34	8	337	71
5	1000	24.07	12	332	115
6	1000	34.13	15	258	157
7	1000	44.55	17	279	198
8	1000	55.29	19	117	236
9	1000	66.37	20	167	273
10	1000	77.77	21	119	309
11	1000	89.50	22	6	342
12	1000	101.58	22	208	374
13	1000	114.07	23	2	405
14	1000	127.03	23	113	435
15	1000	140.45	23	186	464
16	1000	154.30	23	227	491
17	1000	168.57	23	243	518
18	1000	183.21	23	236	543
19	1000	198.21	23	208	567
20	1000	213.51	23	160	590

NONFORFEITURE FACTOR	10.00278
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POLICY DATA PAGE

POLICY NUMBER 8-001001 \$1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	57.41**	29.28	14.93	N/A
PRE-AUTHORIZED CHECK	57.41	29.28	14.93	5.17

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	57.41
YOUR TOTAL ANNUAL PREMIUM IS	57.41

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 5.00%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, SMOKER

2

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF \$1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	1000	0.00	0	0	0
2	1000	0.00	0	0	0
3	1000	7.84	3	69	32
4	1000	19.39	6	227	78
5	1000	31.31	9	86	122
6	1000	43.58	11	176	163
7	1000	56.18	13	68	203
8	1000	69.07	14	168	241
9	1000	82.24	15	186	278
10	1000	95.65	16	134	312
11	1000	109.33	17	7	345
12	1000	123.31	17	184	376
13	1000	137.67	17	322	407
14	1000	152.53	18	69	436
15	1000	167.84	18	161	464
16	1000	183.56	18	235	491
17	1000	199.60	18	293	517
18	1000	215.91	18	331	542
19	1000	232.40	18	348	565
20	1000	248.98	18	349	587

NONFORFEITURE FACTOR	13.04786
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POLICY DATA PAGE

POLICY NUMBER 8-001001 \$1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NON-NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	52.54**	26.80	13.66	N/A
PRE-AUTHORIZED CHECK	52.54	26.80	13.66	4.73

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	52.54
YOUR TOTAL ANNUAL PREMIUM IS	52.54

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 4.5%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, NON-SMOKER

2

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF \$1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	1000	0.00	0	0	0
2	1000	0.00	0	0	0
3	1000	4.98	3	289	25
4	1000	14.34	8	337	71
5	1000	24.07	12	332	115
6	1000	34.13	15	258	157
7	1000	44.55	17	279	198
8	1000	55.29	19	117	236
9	1000	66.37	20	167	273
10	1000	77.77	21	119	309
11	1000	89.50	22	6	342
12	1000	101.58	22	208	374
13	1000	114.07	23	2	405
14	1000	127.03	23	113	435
15	1000	140.45	23	186	464
16	1000	154.30	23	227	491
17	1000	168.57	23	243	518
18	1000	183.21	23	236	543
19	1000	198.21	23	208	567
20	1000	213.51	23	160	590

NONFORFEITURE FACTOR	10.00278
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POLICY DATA PAGE

POLICY NUMBER 8-001001 \$1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	72.62**	37.04	18.88	N/A
PRE-AUTHORIZED CHECK	72.62	37.04	18.88	6.54

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	72.62
YOUR TOTAL ANNUAL PREMIUM IS	72.62

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 4.5%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, SMOKER

2

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF \$1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	*	0.00	0	0	0
2	*	2.56	1	57	11
3	1000	13.68	5	113	57
4	1000	25.17	8	90	101
5	1000	37.02	10	255	144
6	1000	49.22	12	256	185
7	1000	61.74	14	66	223
8	1000	74.56	15	121	261
9	1000	87.65	16	107	296
10	1000	100.98	17	21	330
11	1000	114.58	17	227	362
12	1000	128.48	18	20	392
13	1000	142.75	18	143	422
14	1000	157.52	18	243	450
15	1000	172.75	18	325	478
16	1000	188.37	19	26	504
17	1000	204.32	19	74	529
18	1000	220.53	19	101	553
19	1000	236.92	19	110	576
20	1000	253.41	19	104	598

NONFORFEITURE FACTOR 12.71712

* DURING THE FIRST TWO POLICY YEARS, THE BENEFIT FOR DEATH BY NATURAL CAUSES IS EQUAL TO A RETURN OF PREMIUMS PAID PLUS 10% INTEREST.

POLICY DATA PAGE

POLICY NUMBER 8-001001 \$1,000 INITIAL FACE AMOUNT
INSURED NAME JOHN DOE
ISSUE DATE 01-31-2011
AGE AT ISSUE 35 MALE SEX NON-NICOTINE
POLICY OWNER JOHN DOE
PLAN WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE
BENEFICIARY SEE ATTACHED APPLICATION

	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY
DIRECT BILLING	66.01**	33.67	17.16	N/A
PRE-AUTHORIZED CHECK	66.01	33.67	17.16	5.94

THE "***" FLAGS THE INITIAL MODE OF PAYMENT.

SCHEDULE OF PREMIUMS

BIRTHDAY	ANNUAL PREMIUM
1-01-1976	66.01
YOUR TOTAL ANNUAL PREMIUM IS	66.01

INTEREST RATE FOR BASIS OF COMPUTATION
NONFORFEITURE RATE 4.5%

MORTALITY TABLE FOR BASIS OF COMPUTATION
2001 COMMISSIONER'S STANDARD ORDINARY, AGE LAST BIRTHDAY,
MALE, NON-SMOKER

2

POLICY VALUES

PLAN	WHOLE LIFE INSURANCE - PREMIUMS PAYABLE FOR LIFE				
POLICY NUMBER	8-001001				
INSURED	JOHN DOE				
ISSUE DATE	01-31-2011	AGE AT ISSUE	35	SEX	MALE

TABLE OF VALUES PER INITIAL FACE AMOUNT OF \$1,000

END OF YEAR	END OF YEAR DEATH BENEFIT	END OF YEAR CASH VALUE	PERIOD OF EXTENDED TERM INSURANCE		AMOUNT OF PAID UP INSURANCE
			Years	Days	
1	*	0.00	0	0	0
2	*	0.05	0	16	0
3	1000	9.05	6	185	47
4	1000	18.38	11	12	91
5	1000	28.06	14	196	134
6	1000	38.09	16	351	176
7	1000	48.46	18	296	215
8	1000	59.16	20	66	253
9	1000	70.19	21	69	289
10	1000	81.54	21	355	324
11	1000	93.23	22	219	357
12	1000	105.26	23	38	388
13	1000	117.70	23	176	418
14	1000	130.60	23	271	447
15	1000	143.97	23	331	475
16	1000	157.76	23	360	502
17	1000	171.97	24	1	528
18	1000	186.55	23	349	553
19	1000	201.49	23	312	576
20	1000	216.72	23	256	599

NONFORFEITURE FACTOR 9.78558

* DURING THE FIRST TWO POLICY YEARS, THE BENEFIT FOR DEATH BY NATURAL CAUSES IS EQUAL TO A RETURN OF PREMIUMS PAID PLUS 10% INTEREST.



ARKANSAS

Flesch Score Certification

This is to certify that the attached Life/Annuity form numbers P-1069-S-A-AR, P-1074-S-AR and P-1075-S-AR, have achieved flesch scores of, 54.3 and 50.0, and comply with the requirements of Arkansas Statutes Ann 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

A handwritten signature in cursive script, reading "Jennifer Drabik", written over a horizontal line.

Jennifer Drabik
Compliance Analyst

November 26, 2012
Date